## STATEMENT OF

PAGE 1 / 4

**FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Donovan for Congress 440 Leverett Avenue ADDRESS (number and street) (Check if address is changed) Staten Island 10308 NY CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS info@campaignfinancial.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 04 2015 C00571869 FEC IDENTIFICATION NUMBER > 3. X IS THIS STATEMENT NEW (N) OR AMENDED (A) I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. William DeLuccio Type or Print Name of Treasurer William DeLuccio [Electronically Filed] 06 2015 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. Office For further information contact: **FEC FORM 1** Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530 Only

Local 202-694-1100

FEC F	orm 1 (Revised 02/2009)	Page <b>2</b>
	COMMITTEE e Committee:	
(a) X	This committee is a principal campaign committee. (Complete the candidate information below.)	
(b)	This committee is an authorized committee, and is NOT a principal campaign committee. (Compinformation below.)	plete the candidate
Name of Candidate	Dan Donovan	
Candidate Party Affilia	tion REP Office X House Senate President	State NY District 11
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate		
Party Co		Democratic,
(d)		Republican, etc.) Party.
Political A	Action Committee (PAC):	
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con-	nected organization is a:
	Corporation Corporation w/o Capital Stock	Labor Organization
	Membership Organization Trade Association	Cooperative
	In addition, this committee is a Lobbyist/Registrant PAC.	
(f)	This committee supports/opposes more than one Federal candidate, and is NOT a separate se committee. (i.e., nonconnected committee)	gregated fund or party
	In addition, this committee is a Lobbyist/Registrant PAC.	
	In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Joint Fun	draising Representative:	
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for tw committees/organizations, at least one of which is an authorized committee of a federal candidate.	o or more political
(h)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for tw committees/organizations, none of which is an authorized committee of a federal candidate.	o or more political
Con	nmittees Participating in Joint Fundraiser	
1.	FEC ID number	
2.	FEC ID number	
3.	FEC ID number	
4		

FEC <b>Form 1</b> (Revised	d 03/3009)	Page <b>3</b>
Write or Type Committee Nar		1 age <b>3</b>
Donovan for C		
		or Londorchin DAC Spanner
-	d Organization, Affiliated Committee, Joint Fundraising Representative, of	or Leadership PAC Sponsor
Patriot Day II 2015		
Mailing Address	PO Box 9891	
	Arlington VA	22219 
	CITY STATE	ZIP CODE
Relationship: Connect	ted Organization Affiliated Committee X Joint Fundraising Representation	ive Leadership PAC Sponsor
. Custodian of Records: Id books and records.	dentify by name, address (phone number optional) and position of the per	rson in possession of committee
	gn Financial S ervices	
Full Name	PO Box 30844	
J		
	Bethesda   MD	20824-0844
Title or Position	CITY STATE	ZIP CODE
Custodian of Records	Telephone number	01 654 3220
B. <b>Treasurer:</b> List the name a any designated agent (e.g.	and address (phone number optional) of the treasurer of the committee; and address (phone number optional) of the treasurer of the committee; and address (phone number optional) of the treasurer of the committee; and address (phone number optional) of the treasurer of the committee; and address (phone number optional) of the treasurer of the committee; and address (phone number optional) of the treasurer of the committee; and address (phone number optional) of the treasurer of the committee; and address (phone number optional) of the treasurer of the committee; and address (phone number optional) of the treasurer of the committee; and address (phone number optional) of the treasurer of the committee; and address (phone number optional) of the treasurer of the committee; and address (phone number optional) of the treasurer of the committee; and address (phone number optional) of the treasurer of the committee; and address (phone number optional) of the treasurer of the committee of the c	and the name and address of
Full Name William [ of Treasurer	DeLuccio	
Mailing Address	440 Leverett Avenue	
	Staten Island NY	10308
	CITY STATE	ZIP CODE
Title or Position Treasurer	Telephone number	01 - 654 - 3220

. 20 . 6 (	evised 02/2009)	Page <b>4</b>
Full Name of		
Designated Agent		
Mailing Address		
		[ , , , , , ]- <b>]</b> , , , ,
	CITY STATE	ZIP CODE
Title or Position		
	Telephone number	
Name of Bank, Deposito	maintains funds. ory, etc.  Ils Fargo Bank	
Name of Bank, Deposite	ory, etc.  Ils Fargo Bank  7901 Wisconsin Avenue	.20814-3619
Name of Bank, Deposite	ory, etc.	20814-3619
Name of Bank, Deposite	ory, etc.  Ils Fargo Bank  7901 Wisconsin Avenue	20814-3619  ZIP CODE
Name of Bank, Deposite  Wel	ory, etc.  Ils Fargo Bank  7901 Wisconsin Avenue  Bethesda  CITY  STATE	
Name of Bank, Deposite  Wel  Mailing Address	Ils Fargo Bank  7901 Wisconsin Avenue  Bethesda  CITY  STATE  ory, etc.	
Name of Bank, Deposite  Wel  Mailing Address	ory, etc.  Ils Fargo Bank  7901 Wisconsin Avenue  Bethesda  CITY  STATE  ory, etc.  Ain Bridge Bank	
Name of Bank, Deposite  Wel  Mailing Address	Ils Fargo Bank  7901 Wisconsin Avenue  Bethesda  CITY  STATE  ory, etc.	
Name of Bank, Deposite  Well  Mailing Address  Name of Bank, Deposite  Cha	ory, etc.  Ils Fargo Bank  7901 Wisconsin Avenue  Bethesda  CITY  STATE  ory, etc.  Ain Bridge Bank	
Name of Bank, Deposite  Well  Mailing Address  Name of Bank, Deposite  Cha	ory, etc.  Ils Fargo Bank  7901 Wisconsin Avenue  Bethesda  CITY  STATE  ory, etc.  Ain Bridge Bank	